



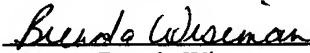
IN THE UNITED STATES PATENT & TRADEMARK OFFICE

ART UNIT:	1616
EXAMINER:	Frank I. Choi
APPLICANT:	Keith A. Rindlesbach
SERIAL NO.:	10/750,376
FILED:	12/31/2006
CONFIRM. NO.:	4892
FOR:	A METHOD FOR REVERSING ALZHEIMER DEMENTIA
DOCKET NO.:	01845-22396

CERTIFICATE OF MAILING
UNDER 37 C.F.R. § 1.8

DATE OF DEPOSIT: November 1, 2006

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NOTICE OF CHANGE IN DOCKET NUMBER

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Sir/Madam:

Please note that the docket number for the above-referenced application has changed from 22396 to 01845-22396. Please make the appropriate changes in the USPTO database.

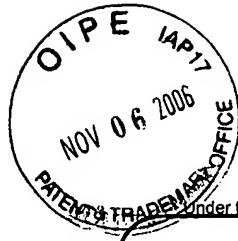
Please charge any fees due, or deposit any overpayments, to Deposit Account No. 20-0100 of the undersigned.

Dated this 1st day of November, 2006.

Respectfully submitted,


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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/750,376
		Filing Date	12/31/2003
		First Named Inventor	Keith A. Rindlesbach
		Art Unit	1616
		Examiner Name	Frank I. Choi
Total Number of Pages in This Submission		Attorney Docket Number	01845-22396

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Postcard
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<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Thorpe North & Western, LLP		
Signature			
Printed name	Gary P. Oakeson		
Date	11/01/2006	Reg. No.	44,266

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Typed or printed name	Brenda Wiseman	Date	11/01/2006

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